(X)

SIGNATURE OF NEW DEALER

West Virginia Department of Transportation



Division of Motor Vehicles Salesperson Notification of Change

MAIL TO: WV DMV Dealer Services Section PO Box 17100 • Charleston, WV 25317 304-926-0705 • www.dmv.wv.gov

THIS FORM MUST BE SUBMITTED WITHIN 10 DAYS OF THE CANCELLATION, TRANSFER, OR EMPLOYMENT.

SECTION A	ISE FOR NOTIFICATION	OF CANCELLATION OF A SALESPERSON'S EMPLOYMENT
	ion of Salesperson's En	
This is to inform the Div	ision of Motor Vehicles (DMV	that the employment of the salesperson, named in the space provided
		, and it is understood that their license to
sell vehicles for this deal		
Name of Salesperson:_		License Number:
Address of Salesperson:		
Name of Dealership:		Dealer Number:
Address of Dealership:_		
(X) SIGNATURE OF DEALER		DATE
SECTION B	ISE FOR NOTICE OF TRA	NSFER OF ADDRESS OR EMPLOYMENT OF A SALESPERSON
	of Address or Employme	
Name of Salesperson:_		License Number:
Appointing Dealer:		Dealer Number:
Address of Dealership: _		
(X) SIGNATURE OF SALESPERSON		DATE

DATE